

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

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Page 2

Accept

Setup Start *NS1*

Stop *NS2*

6

Cust Item ID:

6

Required Date: 8/28/13 Req'd Qty: 6.00

Customer:

Reference:

Run Start *NR1*

Approvals: **Process Plan:** _____ **Date:** _____ **Tooling:** _____ **Date:** _____

Stop *NR2*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Operation Description

Set Up/ Run Hours

Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
---------	--------	-----------	------------	------------	---------------	-------------

NC BRAKE

0.00

130

0.00

Brake NC

Memo

Brake NC

Form as per Dwg D3639

**DAS
27
9-89**

140

QC5- Inspect part completeness to step on W/O

0.00

140

0.00

QC

Memo

Quality Control

150

Chemical Conversion Coat per QSI005 4.1

0.00

150

0.00

HandFinish

Memo

Hand Finishing

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Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear	General	Other
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<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
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		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 106166

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106166

Page 3

Item ID: D3639-4 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Doubler
 Start Date: 8/28/13 Start Qty: 6.00 ***6*** Cust Item ID:
 Required Date: 8/28/13 Req'd Qty: 6.00 ***6*** Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
160 *160* QC Quality Control	QC3- Inspect Part Finish Memo	0.00 0.00 B 10 10		DAS 27 9-89		6			
170 *170* Packaging Packaging	Identify as per dwg & Stock Location: <u>ST245A</u> Memo	0.00 0.00				6X	DAS 28 9-89	13-10-11	
180 *180* QC Quality Control	QC21- Final Inspection - Work Order Release Memo	0.00 0.00						MLJ 13-10-11	

MLJ 13-10-11

NCR: Yes / No

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Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
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FAULT CATEGORY

Landing Gear	General	Other
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		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Picklist Print

Page 1

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Work Order ID: 106166

106166

Parent Item: D3639-4

D3639-4

Parent Item Name: Doubler

Start Date: 8/28/13

Required Date: 8/28/13

Start Qty: 6.00

Required Qty: 6.00

Comments: IPP Rev:A New Issue 07-07-20 JLM Verified By:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M2024T3S.050		Purchased	No			100	sf	144.3920	0.4277	2,701,263			
										**	3.0	Jm 3-10-06	

M2024T3S 050

2024-T3 .050 sheet

Location

Loc Qty

Loc Code

MAT022

144.392

124643

144.392

124643

NCR: Yes / No

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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

DART AEROSPACE LTD		Work Order:	106 166
Description: Doubler		Part Number:	D3639-4
Inspection Dwg: D3639	Rev: A	Page 1 of 1	

FIRST ARTICLE INSPECTION CHECKLIST

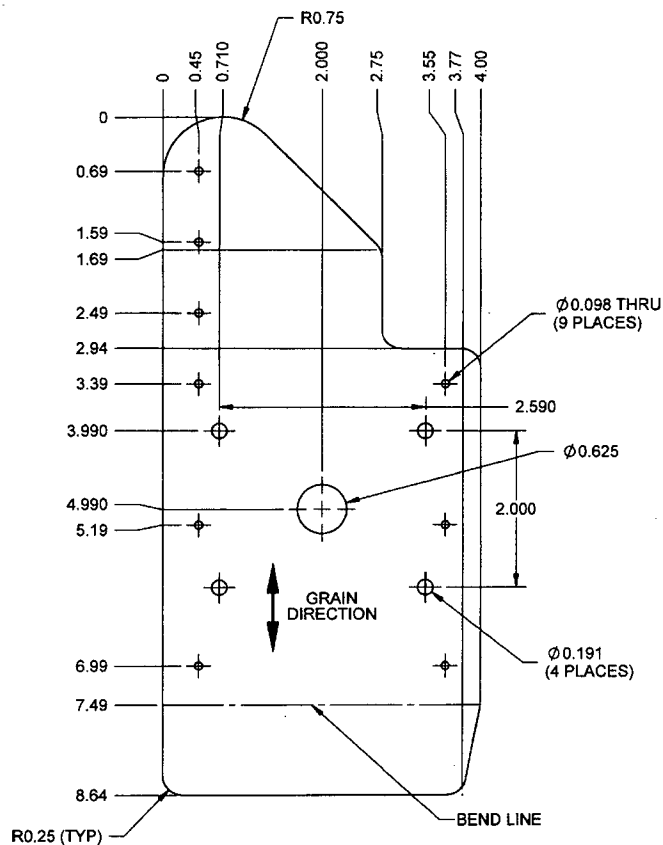
☒ First Article ☐ Prototype

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
Ø0.625	+0.008/-0.001	0.626"	-		✓	Jkm01
Ø0.191	+0.005/-0.001	0.191"	-		✓	
Ø0.098	+0.004/-0.001	0.099"	-		✓	
0.45	+/-0.030	0.45"	-		✓	
1.350	+/-0.010	1.353"	-		✓	
2.25	+/-0.030	2.255"	-		✓	
3.15	+/-0.030	3.153"	-		✓	
4.05	+/-0.030	4.054"	-		✓	
4.95	+/-0.030	4.956"	-		✓	
5.85	+/-0.030	5.85"	-		✓	
6.75	+/-0.030	6.749"	-		✓	
7.65	+/-0.030	7.655"	-		✓	
8.55	+/-0.030	8.553"	-		✓	Produced
9.350	+/-0.010	9.356"	-		✓	
9.45	+/-0.030	9.45"	-		✓	
10.350	+/-0.010	10.352"	-		✓	
11.25	+/-0.030	11.75"	-		✓	
12.15	+/-0.030	12.15"	-		T	Jkm06
12.85	+/-0.030	12.85"	-		T	
13.86	+/-0.030	13.86"	-		T	
13.96	+/-0.030	13.96"	-		T	
0.805	+/-0.010	0.809"	-		✓	
1.00	+/-0.030	1.004"	-		✓	
2.100	+/-0.010	2.101"	-		✓	
3.30	+/-0.030	3.307"	-		✓	
2.000	+/-0.010	2.003"	-		✓	
2.590	+/-0.010	2.596"	-		✓	

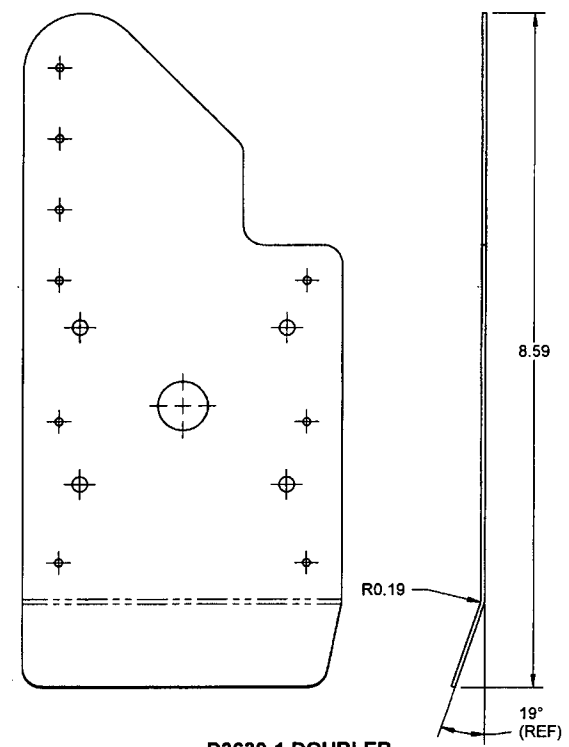
Measured by: Jm	Audited by: DAS	Prototype Approval:	N/A
Date: 13-10-06	Date: 27 9-00	Date:	N/A

Rev	Date	Change	Revised by	Approved
A	07.10.24	New Issue	KJ/EC/DD	

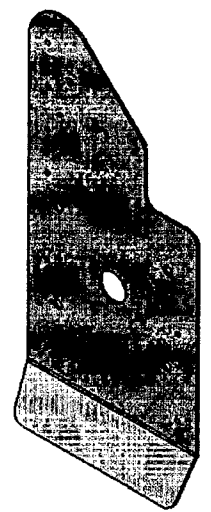
8 7 6 5 4 3 2 1



D3639-1F FLAT PATTERN
(D3639-2F OPPOSITE)



D3639-1 DOUBLER
(WAS GENEVA P/N G10604-3)
D3639-2 OPPOSITE
(WAS GENEVA P/N G10604-6)



RELEASED
07-07-07

- NOTES:**
- 1) MATERIAL: 2024-T3 ALUMINUM SHEET 0.050 THICK PER QQ-A-250/4 OR AMS 4037 (REF DART SPEC M2024T3S.050)
 - 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
 - 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
 - 4) UNITS: INCHES UNLESS OTHERWISE NOTED
 - 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
 - 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3639-1/-2" USING FINE POINT PERMANENT INK MARKER
 - 7) WEIGHT: 0.14 lbs

106166 MLJ
13-08-30

A		NEW ISSUE; REPLACES G10604		LE	07.07.27
REV.		DESCRIPTION		BY	DATE
DESIGN	TS	DART AEROSPACE USA, INC. PORT HADLOCK, WA			
DRAWN	LE				
CHECKED	LE	DRAWING NO.	D3639	REV. A	
MFG. APPR.	LE	SHEET 1 OF 2			SCALE
APPROVED	LE	TITLE			DOUBLER
DE APPR.	LE	DATE			07.07.27
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DESIGN	TS	DART AEROSPACE USA, INC.	
DRAWN	CE	PORT HADLOCK, WA	
CHECKED	JS	DRAWING NO.	REV. 1
MFG. APPR.	B	D3639	SHEET 2 OF 2
APPROVED	JS	TITLE	SCALE
DE APPR.	JS	DOUBLER	2:
DATE	07.07.27	COPYRIGHT © 2007 BY DART AEROSPACE USA, INC. THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL. IT IS SUPPLIED ON THE UNDERSTANDING THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR REPRODUCED IN ANY MANNER WITHOUT THE WRITTEN PERMISSION OF DART AEROSPACE USA, INC.	